1502 Application for a Certificate of Public Convenience And Advantage Pursuant to 5 Del. C. §1513

Formerly Regulation No.: 5.1513.0002 Effective Date: December 8, 1995

Any application made to the State Bank Commissioner pursuant to §1513 of Title 5, **Delaware Code**, shall be submitted on the form appended hereto and accompanied by all documents called for by such form. A non_refundable investigation fee of One Thousand One Hundred and Fifty Dollars, payable to the "Office of the State Bank Commissioner", must accompany the filing of the attached application (see Regulation 1501 (formerly 5.1513.0001)).

STATE OF DELAWARE OFFICE OF THE STATE BANK COMMISSIONER

Application for Certificate of Public Convenience And Advantage Pursuant to Section 1513 Of Title 5 of The Delaware Code

Γ ADDRESS	CITY	
Y	STATE	ZIP CODE
OF INCORPORATOR(S)		1
SS OF INCORPORATOR		
I (we), the undersign	ed incorporator(s), hereby apply	for a Certificate of
Public Convenience and Ac	dvantage with respect to the prop	osed credit card
institution (hereinafter refer	rred to as the "Bank"). In making	g this application, I
(we) am (are) not acting as	agent(s) for other persons undisc	elosed to the State
Bank Commissioner. In su	pport of this application, I (we) h	nereby make the
following statements and re	epresentations and submit the following	lowing information
for the purpose of inducing	the State Bank Commissioner to	issue such Certificate
of Public Convenience and	Advantage:	
THE UNDERSIGNE	ED HEREBY CERTIFIES that th	e statements
contained herein are true to	my best knowledge and belief.	
SIGNATURE	, NAME	
SIGNATUKE	NAME	

DATE

I. FINANCIAL HISTORY AND CONDITION A. PRO FORMA STATEMENT OF CONDITION - BEGINNING OF BUSINESS ASSETS LIABILITIES AND CAPITAL **AMOUNT** Description Description **AMOUNT** Cash and due from banks LIABILITIES Securities Loans Premises TOTAL LIABILITIES Furniture, fixtures and equipment CAPITAL Other assets Net organization expense (Same as 1E) Total Capital Accounts (Same as II A) TOTAL ASSETS TOTAL LIABILITIES AND CAPITAL B. SINGLE OFFICE OF BANK THAT ACCEPTS DEPOSITS INSTRUCTIONS: Complete all appropriate sections below. Where not applicable, insert None. When the disclosure of any information may adversely affect ongoing negotiations, include such information in the Confidential Section of this application. Copies of any completed contracts should be submitted for the confidential use of the State Bank Commissioner. 1. Type of Occupancy (Check all which apply to indicate both type of quarters at opening and contemplated permanent quarters.) Permanent quarters leased (Complete 2 and 3 below) Permanent quarters owned (*Complete 2 and 4 below*) ☐ Temporary quarters (*Complete 5 below*) 2. DESCRIPTION OF PREMISES DIMENSIONS OF BUILDING DIMENSIONS OF LOT NO. OF NO. PARKING SPACES **STORIES** TYPE OF CONSTRUCTION OF BUILDING DETAILS OF BUILDING INTERIOR (Mention all employee facilities and size of lobby area) 3. PREMISES LEASED NAME OF OWNER COST OR APPRAISED VALUE OF PREMISES INSURANCE TO BE CARRIED COST AND DESCRIPTION OF LEASEHOLD IMPROVEMENTS ANNUAL RENTAL ANNUAL AMORTIZATION TERMS OF LEASE (Include renewal options)

I. FINANCIAL HISTORY AND CONDITION (Continued)

Copies of any lease should be submitted for the confidential use of the State Bank Commissioner. Except where State law obviates the need, a clause similar to the following should be incorporated in all leases drawn for a term exceeding one year in connection with this application:

"Notwithstanding any other provisions contained in this lease, in the event the Lessee is closed or taken over by the banking authority of the State of Delaware, or other bank supervisory authority, the Lessor may terminate the lease only with the concurrence of such banking authority or other bank supervisory authority, and any such authority shall in any event have the election either to continue or to terminate the lease. Provided, that in the event this lease is terminated, the maximum claim of Lessor for damages or indemnity for injury resulting from the rejection or abandonment of the unexpired term of the lease shall in no event be in an amount exceeding the rent reserved by the lease, without acceleration, for the year next succeeding the date of the surrender of the premises to the Lessor, or the date of re-entry of the Lessor, whichever first occurs, whether before or after the closing of the bank, plus an amount equal to the unpaid rent accrued, without acceleration up to such date."

4. PREMISES OWNED				
EXISTING STRUCTURE				
NAME OF SELLER		DATE CONSTRUCTED	COST TO BANK	
COST AND DESCRIPTION O	F NECESSARY REPAIRS AT	ND ALTERATIONS		
Assessed Valuation	Insurance to be Carried	Estimated Annual Depreciation	Depreciation Method	
Assessed valuation	insurance to be carried	Estimated Affidat Depreciation	Depreciation Method	
	PROPOSE	D STRUCTURE		
IMPORTANT: In estimating cost of	of construction, include architect's	fee, site preparation, paving and land	scaping	
NAME OF SELLER OF LOT		COST OF LOT TO BANK	CONSTRUCTION COST	
Estimated Assessed Valuation	Insurance to be Carried	Estimated Annual Depreciation	Depreciation Method	
IS THE BANK STRUCTURE TO		DITIONS TO THE BUILDING AT A	A LATER DATE? YES NO	
	5. TEMPOR	ARY QUARTERS	<u> </u>	
NAME OF OWNER			COST OR MONTHLY RENTAL	
LOCATION (L. L. L	I C	`	DIGUIDANCE TO DE CARRIED	
LOCATION (Include distance and	direction from permanent quarters	")	INSURANCE TO BE CARRIED	
DESCRIPTION OF FACILITIES A	AND SERVICES OFFERED (Subn	nit copies of lease or other contracts)	
	`	1	,	
COMMENTS				

I. FINANCIAL HISTORY AND CONDITION (Continued)

C. PROPOSED INVESTMENT IN AND RENTAL OF FURNITURE, FIXTURES AND EQUIPMENT

ITEM		TOTAL NO.	TOTAL COST	ANNUAL RENTAL
Safe		OF UNITS	(If Owned)	(If Leased)
Sale				
Vault Door				
Vault Ventilator				
Counter and Gate Fixtures				
Counter and Gate 1 ixtares				
Night Depository				
Tellers chests				
Adding Machines				
Automobiles				
Canceling Machine				
Checkwriter				
*Electronic Data Processing Equipment				
Microfilmer				
Posting Machines				
Proof Machines				
Tellers' Machines				
Typewriters				
Chairs				
Desks				
Filing Cabinets				
Tables				
Air Conditioning System				
Heating System				
Carpeting				
Draperies				
Other (Specify):				
	TOTALS			
TOTAL INSURANCE TO BE CARRIED	TOTAL ANNUAL DEPRE	CIATION	DEPRECIATION	METHOD

	I. FINAN	CIAL HISTO	ORY AND CO	NDITION (Continued)
*LIST ALL ITEMS COMPRISE PROCESSED ON PREMISES		EDP INVENT	ORY AND LI	ST THE APPLICATIONS THAT WOULD BE
	ervicer(s) if	f known and t	he applications	CCTRONIC DATA PROCESSING SERVICE? that would be processed off-premise. Attach copies of
DO PROPOSED FIXED ASSET (If no, describe the deficiency and				TATUTORY LIMITATIONS? YES NO
I	D.1 RELA	TIONSHIPS	AND ASSOC	IATIONS WITH BANK
	N OTHERV	VISE DIRECT		S OR LESSORS OF LAND, BUILDINGS OR RECTLY ASSOCIATED WITH THE APPLICANT?
NAME		ITEM Appropriate	Column)	RELATIONSHIP OR ASSOCIATION WITH BANK (Specify Director, Officer, 5% Stockholder, or their relatives
. W. H. H.	Land	Building	Equipment	Designate any business interests of the aforementioned)
Upon organization, the proposed	l bank will	not refinance,	directly or ind	e CONFIDENTIAL SECTION of this application. irectly, any loan, advance, or credit extension originally duals listed above for the purpose of obtaining funds to
	D.2 FULI	L DISCLOSU	JRE OF INSII	DER TRANSACTIONS

Full disclosure will be required in writing to all directors and shareholders concerning all insider transactions including fixed asset involvements and attorney, consultant and similar fees in excess of \$5,000. If such disclosure has been made, attach a copy thereof, indicate to whom the disclosure was made, and the date of such disclosure. If disclosure has not been made, indicate plans in this regard.

I. FINANCIAL HISTORY AND CONDITION (Continued)

E. ORGANIZATION EXPENSES

<u>INSTRUCTIONS</u>: List all expenses related to the organization of the Bank. Include all expenses paid, additional costs anticipated prior to the opening date, and include any expenses for work performed during the organization phases for which disbursement has been deferred beyond the opening date. <u>This subsection E need not be completed if the organizational expenses do not exceed five percent of the proposed Bank's initial capitalization</u>.

IMPORTANT: If legal or other fees appear to be excessive in volume or amount, supportive documentation will be required. TYPE OF RELATIONSHIP (Specify Director, Officer, ASSOCIATION WITH BANK 5% stockholder, or their NAME OF RECIPIENT relatives. Designate any **AMOUNT** Mark appropriate column business interests of the Direct Indirect aforementioned) Attorney Fees 1. TOTAL ATTORNEY FEES Consultant Fees: 2. TOTAL CONSULTANT FEES 3. TOTAL PRE-OPENING SALARIES 4. TOTAL PRE-OPENING TRAVEL AND ENTERTAINMENT 5. TOTAL APPLICATION AND INVESTIGATION FEES Other Expenses: (Describe in detail any item in excess of \$1,000) 6. TOTAL OTHER EXPENSES Total Organization Expenses (Sum of lines 1 thru 6 above) Pre-opening income NET TOTAL DESCRIBE SOURCE OF PRE-OPENING INCOME

DESCRIBE HOW ORGANIZATION EXPENSES WILL BE PAID

II. ADEQUACY OF THE CAPITAL STRUCTURE

A. PROPOSED PAID-IN CAPITAL STRUCTURE

<u>IMPORTANT</u>: Upon organization, the proposed bank will not refinance, directly or indirectly, any loan, advance, or credit extension originally made by an existing financial institution, or others, to any subscriber or shareholder for the purpose of obtaining funds to purchase stock in the proposed bank.

	DESCRIPTION			AMOUNT
Common capital (no. of shares @	par value)		
Surplus				
Organization expense fund				
Other capital segregations				
			TOTAL	
LIST AMOUNTS AND RE CONNECTION WITH THE	ECIPIENTS OF ANY FEES OR CO E SALE OF STOCK	MMISSIONS IN		SALE PRICE PER SHARE

NOTE: Attach a copy of the stock subscription form which will be used in connection with the issuance of capital stock. A substantially complete list of stock subscribers will have to be submitted before the application can be processed.

B. ESTIMATED DEPOSITS

ELIGIBLE* DEPOSITS OF:	AVERAGE DURING			
	First Year	Second Year	Third Year	
INDIVIDUALS, PARTNERSHIPS, AND				
CORPORATIONS				
PUBLIC FUNDS				
BANKS AND OTHER FINANCIAL				
INSTITUTIONS				
TOTAL ELIGIBLE DEPOSITS				

^{*}Eligible deposits are deposits bearing a maturity of no less than 30 days in an amount not less than \$100,000.

THE ABOVE ESTIMATES ARE BASED ON THE FOLLOWING DATA AND ASSUMPTIONS:

IMPORTANT: The bank will at all times maintain adequate capital accounts in relation to the true value of its total assets.

III. FUTURE EARNINGS PROSPECTS

The prospective incorporator(s) are of the opinion that within a reasonable period after commencement of business, the earnings of the proposed bank will be sufficient to cover all operating expenses, losses and charge-offs and to provide a reasonable return to shareholders.

A. ESTIMATED AVERAGE DEPOSITS AND ASSETS

INSTRUCTIONS: Average deposits for the second and third years are computed by adding figures at the end of the preceding year to the totals at the end of the subject year and dividing by two (*Refer to II*, B).

DESCRIPTION	AVERAGE DURING			
	First Year	Second Year	Third Year	
AVERAGE DEPOSIT VOLUME:				
A. Demand deposits				
B. Interest bearing deposits				
Total estimated average deposit volume				
Capital paid in (Should agree with II, A)				
Total estimated average assets				

B. ESTIMATED INCOME AND EXPENSES

INSTRUCTIONS: Gross Income is calculated by multiplying the estimated return on assets by the total estimated average assets above. Describe in Comments below or in the CONFIDENTIAL SECTION the assumption on which the estimated return and the expense estimates are based.

DESCRIPTION	ESTIMATED AMOUNT		
	First Year	Second Year	Third Year
Gross Income (% % %)			
EXPENSES:			
1. Salaries and benefits			
2. Interest on deposits			
3. Net occupancy expense (details below)			
4. Furniture and equipment (depreciation, rental, maintenance, etc.)			
5. Provision for loan losses			
6. Other operating expenses:			
Advertising			
Telephone			
Legal			
Postage			
Computer services			
Directors' fees			
Assessments by regulatory authorities			
Miscellaneous			
7. Net organization expenses (1st year only. Should agree with 1E).			
TOTAL ESTIMATED EXPENSES			
ESTIMATED NET PROFIT OR (LOSS)			
OCCUPANCY EXPENSE:			
Rent			
Depreciation			
Repairs			
Maintenance (including building staff salaries)			
Insurance			
Taxes on real estate			
Utilities (heat, light, power, etc.)			
Other occupancy cost			
TOTAL OCCUPANCY EXPENSES			
Less: Rental Income			
Net occupancy cost (should agree with line 3 above)			
NOTE: The shows schedule should be completed on the basis of utilization			1 . 1

NOTE: The above schedule should be completed on the basis of utilization of an accrual accounting system of bookkeeping which the applicant agrees to adopt.

IV. GENERAL CHARACTER OF THE MANAGEMENT

A. DIRECTORS AND OFFICERS

INSTRUCTIONS: List alphabetically, by group, all Directors and Non-director Officers. Indicate the status of each individual listed by checking the appropriate box at left (D - Director, O - Officer). If disclosure of any of the proposed officers of the proposed bank would jeopardize current employment, include the information in the Confidential Section.

STATUS	NAME AND ADDRESS		
(Check)	(Including ZIP Code)	OCCUPATION	TITLE
D			
0			
D			
0			
D			
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D			
0			
D			
0			
D			
0			
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DISCUSS CHANGES CONTEMPLATED IN THE PROPOSED DIRECTORATE OR ACTIVE MANAGEMENT DURING THE FIRST YEAR (If none, so state)

DAN DUTIES
DUTIES
STMENT
DUTIES
JDIT
DUTIES
Y COVERAGE ond coverage on its active officers and employees to conform maintain an excess employee dishonesty bond in the amount of
SENTATIONS
on behalf of any other person, partnership, association or ents below.)
o any written or oral agreement or understanding providing for idating the proposed bank with, any other financial institution?
IT LIFE INSURANCE
VITH RESPECT TO INCOME DERIVED FROM THE SALE

V. PLAN OF OPERATION/PUBLIC CONVENIENCE AND ADVANTAGE

A. DELAWARE OFFICE ACCEPTING DEPOSITS

With reference to the proposed Bank's Delaware office that will accept deposits, list below or on a separate sheet: (1) the type of building and/or complex (e.g., multistory office building; business or industrial park) in which the office will be located, (2) whether the office is in a retail trade area, (3) a description of the types of other businesses located in the vicinity of the public office, (4) the customer services that will be made available at the public office and (5) a description of any signs, placards, or logos (including the proposed dimensions thereof) that will identify to the public the location of the office (if available, facsimiles should be attached).

V. PLAN OF OPERATION/PUBLIC CONVENIENCE AND ADVANTAGE (Continued)

B. LOCATION AND DESCRIPTION OF OTHER PREMISES

Attached hereto a listing of all premises, if any, proposed to be occupied by the Bank in addition to the Bank's Delaware office that accepts deposits and set forth all information concerning such additional premises that is required for the Bank's office under Section I.B. of this application (include copies of any relevant leases).

C. BUSINESS PLANS

1. Briefly describe the reasons for submitting this Application and how the proposed Bank will become an economically viable institution. Indicate the affiliations expected between the proposed Bank and any other bank, holding company or other financial institution.

V. PLAN OF OPERATION/PUBLIC CONVENIENCE AND ADVANTAGE (Continued)
2. Describe the types of services and products that the proposed Bank plans to offer.
3. Describe the geographic and demographic markets that the proposed Bank expects to principally serve.

	V. PLAN OF OPERATION/PUBLIC CONVENIENCE AND ADVANTAGE (Continued)
4.	Describe the expected sources of funds for the proposed Bank's lending activities.
•	Set forth a projection of the number of persons who will be employed by the proposed Bank as of the end of each of its first three years of operation, identifying to the extent possible employment categories (e.g., number of secretaries, number of consumer loan officers, number of clerical or data processing personnel, etc.)

V. PLAN OF OPERATION/PUBLIC CONVENIENCE AND ADVANTAGE (Continued)

D. COMMUNITY REINVESTMENT ACT

Applicant bank must adopt a Community Reinvestment Act Statement and Notice as described in Sections 345.4 and 345.6 of the Federal Deposit Insurance Corporation's Rules and Regulations. *Attach* a copy of the Statement and Notice. Describe the policies or specific programs to be used to determine the credit needs of the entire community, including low to moderate income neighborhoods *and* indicate those policies or specific programs which will be implemented to help meet the existing or anticipated credit needs of the entire community, including low to moderate neighborhoods, consistent with safe and sound operation of the bank.

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY - CONFIDENTIAL SECTION

In preparing your application, keep in mind that the State Bank Commissioner deems that public policy warrants making all information submitted to him in connection with this application available for public review, unless it qualifies for confidential treatment under 29 Del. C. §§ 10002(d), 10112(b)(4), and Superior Court Rule of Civil Procedure 26(c)(7). The Commissioner has determined that trade secrets, proprietary information and confidential financial information useful to applicant in its business will ordinarily qualify for such protection.

However, specific determinations of the question of confidentiality and nondisclosure rests in the first instance in the discretion of the Commissioner and the specific information you include in the following section may be available for public review in the discretion of the Commissioner.

I. FINANCIAL HISTORY AND CONDITION				
OUTLINE BELOW INFORMATION WITH REGARD TO FIXED ASSETS WHICH YOU BELIEVE, IF DISCLOSED TO THE PUBLIC, WOULD ADVERSELY AFFECT ONGOING NEGOTIATIONS.				
OUTLINE BELOW, IN DETAIL, THE BASIS FOR COST ESTIMATES FOR PREMISES SHOWN IN THE PUBLIC SECTION.				
IF FIXED ASSETS ARE TO BE PURCHASED FROM A RELATED PARTY, EVIDENCE OF THE REASONABLENESS OF THE COST(S) MUST BE PROVIDED. ATTACH COPIES OF BIDS, INDEPENDENT APPRAISALS AND/OR OTHER SUPPORTING EVIDENCE.				
IF AN INSIDER IS A PARTY TO ANY LEASE CONTRACT IN CONNECTION WITH THE APPLICATION, EXPLAIN THE MANNER IN WHICH LEASE PAYMENTS WERE DETERMINED.				

I. FINANCIAL HISTORY AND CONDITION (Contin
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SPECIFY THE TIME REQUIRED TO PREPARE THE BANK PREMISES FOR OCCUPANCY. IF TEMPORARY
QUARTERS ARE ANTICIPATED, ESTIMATE THE PROBABLE TERM OF OCCUPANCY AND DESCRIBE THE
DISPOSITION OF SUCH QUARTERS.

OUTLINE SPECIFIC PROGRAMS AND PROTECTIVE DEVICES WHICH ARE TO BE FOLLOWED AND USED IN COMPLIANCE WITH PART 32f OF THE RULES AND REGULATIONS OF THE FEDERAL DEPOSIT INSURANCE CORPORATION.

II. ADEQUACY OF CAPITAL STRUCTURE

STATE THE CASH DIVIDEND POLICIES TO BE FOLLOWED DURING THE FIRST THREE YEARS OF OPERATION.

IMPORTANT: A substantially complete list of stock subscribers will be required prior to final consideration of this application.

INSTRUCTIONS: List all known subscribers to the capital stock of the Proposed Bank.

NAME

PLACE OF RESIDENCE

NO. OF SHARES SUBSCRIBED

NO. OF SHARES SUBSCRIBED

II. ADEQUACY OF CAPITAL STRUCTURE (Continued)							
INSTRUCTIONS: List all known subscribers to the capital stock of the Proposed Bank.							
NAME	PLACE OF RESIDENCE	NO. OF SHARES SUBSCRIBED					

III. FUTURE EARNINGS PROSPECTS						
ESTIMATE OF SALARIES AND WAGES						
Position	First Year	Second Year	Third Year			
OFFICERS						
OTHER EMPLOYEES						
TOTAL						
TOTAL			_			
STIPULATE INTEREST RATE	ES TO BE PAID ON DEPOS	SITS				
EXCHANGE AND SERVICE (CHARGE POLICIES TO BE	E FOLLOWED				
COMMENTS (include other in application)	formation supporting income	e and expense estimates reported	d in the Public Section of this			

				Confiden	itial Sectio	
IV	. GENERAL CHARACTER C	OF THE MANA	GEMENT			
NOTE: Attach a copy of the fina 6200/06) and a stock financing for more of the total capital.						
	PROPOSED OF	FICERS				
NAME	ADDRESS	AGE	OCCUPATION	TITLE		
					(Check One)	
1 Has any proposed director, off dishonesty or a breach of trust			offense involving	Yes	No	
Do stock option plans exist? (If Yes, explain in Comments below.)						
3. If stock option plans exist, has Include a copy of the disclosur	full disclosure been made, in write statement with your application		nolders? (NOTE:			
4. Have correspondent bank relationships been established? (If Yes, list below)						
LIST NAMES AND ADDRESSE	ES OF ALL CORRESPONDENT	BANKS				
5. Are there any agreements with the proposed bank in connecti financing the purchase of stock	on with loans to any director, offi	cer, employee, or		e purpose		
6. Are bonus, management or din Yes, attach copies.)	rector compensation, or other sim	ilar plans in effec	et or anticipated? Y	es 🗌 No) (If	
COMMENTS						

V. PUBLIC CONVENIENCE AND ADVANTAGE (Cont'd)

LIST THE PROPOSED HOURS OF OPERATION FOR THE PROPOSED BANK